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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Sandra First name C. Middle name Rodriguez Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9039 | |

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Case number (if known)

Debtor 1 Sandra C. Rodriguez

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|---|---|--|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) EINs | | | |
| 5. | Where you live | 2126 Grove Ave. | If Debtor 2 lives at a different address: | | | |
| | | Berwyn, IL 60402 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook | | | | |
| | | County | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Debtor 1 Sandra C. Rodriguez

Case number (if known)

| ar | Tell the Court About | Your B | ankruptcy Ca | se | | | |
|-----|---|---|-----------------|-----------------------------------|---|---|---------|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
| | choosing to file under | ■ C | hapter 7 | | | | |
| | | □с | hapter 11 | | | | |
| | | □с | hapter 12 | | | | |
| | | □с | hapter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is sub | pically, if you are paying the fee yo | k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, o alf, your attorney may pay with a credit card or che | r money |
| | | | | | tallments. If you choose this optice to (Official Form 103A). | n, sign and attach the Application for Individuals | to Pay |
| | | | I request tha | t my fee be wa | aived (You may request this option | n only if you are filing for Chapter 7. By law, a judg | |
| | | | applies to you | ır family size ar | nd you are unable to pay the fee ir | ur income is less than 150% of the official poverty installments). If you choose this option, you mus | |
| | | | the Application | n to Have the (| Chapter 7 Filing Fee Waived (Offic | ial Form 103B) and file it with your petition. | |
|). | Have you filed for | ■ No | | | | | |
| | bankruptcy within the last 8 years? | — NC | | | | | |
| | iast o years: | ш те | District | | When | Case number | |
| | | | District | | When | Case number Case number | |
| | | | District | | When | Case number | |
| | | | District | | WIIOIII | | |
| 10. | Are any bankruptcy | ■ No |) | | | | |
| | cases pending or being filed by a spouse who is | □Y€ | es. | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | |
| | | | Debtor | - | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | ■ No | Go to li | ne 12. | | | |
| | residence? | □Y€ | es. Has yo | ur landlord obta | ained an eviction judgment agains | t you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | | | Judgment Against You (Form 101A) and file it with | h this |
| | | | _ | bankruptcy pe | | , | |
| | | | | | | | |

| Deb | Case 16-2 tor 1 <u>Sandra C. Rodrig</u> | | Doc 1 | Filed 07/20/16 Document | Entered 07/20/16 15:57:46 Page 4 of 54 Case number (if known) | Desc Main |
|-----|---|------------------------|--|--|--|-----------------------------------|
| art | Report About Any Bu | usinesses ' | You Own a | s a Sole Proprietor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Pa | art 4. | | |
| | | ☐ Yes. | Name a | nd location of business | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of | business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number | , Street, City, State & ZIP | Code | |
| | it to this petition. | | Check th | ne appropriate box to des | scribe your business: | |
| | | | □ + | Health Care Business (as | defined in 11 U.S.C. § 101(27A)) | |
| | | | | Single Asset Real Estate | (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | Stockbroker (as defined in | n 11 U.S.C. § 101(53A)) | |
| | | | | Commodity Broker (as de | fined in 11 U.S.C. § 101(6)) | |
| | | | <u> </u> | None of the above | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | s. If you indices, cash-flow .C. 1116(1)(| cate that you are a small a statement, and federal in (B). | ust know whether you are a small business de business debtor, you must attach your most re ncome tax return or if any of these documents | ecent balance sheet, statement of |
| | For a definition of small | ■ No. | I am not | filing under Chapter 11. | | |

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

business debtor, see 11

U.S.C. § 101(51D).

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| INO. | |
|------|--|
| | |
| | |

☐ No.

☐ Yes.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

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Debtor 1 Sandra C. Rodriguez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 54 Case number (if known) Debtor 1 Sandra C. Rodriguez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sandra C. Rodriguez Signature of Debtor 2 Sandra C. Rodriguez

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on July 20, 2016

MM / DD / YYYY

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Debtor 1 Sandra C. Rodriguez

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ James | J. Burns Jr. # | Date | July 20, 2016 |
|-----------------|------------------------|---------------|--------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| James J. E | Burns Jr. # | | |
| Printed name | | | |
| The Burns | Law Firm P.C. | | |
| Firm name | | | |
| 53 West Ja | ackson Boulevard | | |
| Suite 724 | | | |
| Chicago, I | L 60604 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 312-880-0195 | Email address | info@burnsbankruptcy.com |
| 6200956 | | | |
| Darnumbar 9 Co | toto | | |

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Sandra C. Rodriguez Part 6: Answer These Questions for Reporting Purposes Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. □ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1.000-5.000 **25,001-50,000** 1-49 you estimate that you **5001-10,000 50.001-100.000 50-99** owe? **10,001-25,000** ■ More than 100,000 **100-199** 200-999 19. How much do you □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$10.000.000.001 - \$50 billion □ \$50,000,001 - \$100 million **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion ■ \$10,000,001 - \$50 million **550,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million More than \$50 billion □ \$500.001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Sandra C. Rodriguez Signature of Debtor 1 Executed on July 15, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

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Debtor 1 Sandra C. Rodriguez

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

Bar number & State

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the person is incorrect.

| Signature of Attorney for Debtor James J. Burns Jr. | Date | July 15, 2016 MM / DD / YYYY |
|--|---------------|---------------------------------|
| The Burns Law Firm P.C. | | |
| 53 West Jackson Boulevard Suite 724 Chicago, IL 60604 Number, Street, City, State & ZIP Code | | |
| Contact phone 312-880-0195 | Email address | info@burnsbankruptcy.com |

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| Debtor 1 Sandra Rodriguez First Name Middle Name Last Name Debtor 2 | |
|--|----------|
| First Name Middle Name Last Name Debtor 2 | |
| | |
| | |
| (Spouse if, filing) First Name Middle Name Last Name | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| Case number | |
| (if known) Check if this is | an |
| amended filing | |
| | |
| Official Form 106Dec | |
| Declaration About an Individual Debtor's Schedules | 12/15 |
| | |
| If two married people are filing together, both are equally responsible for supplying correct information. | |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing proper | ty, or |
| obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for u | |
| years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | |
| Sign Below | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | |
| ■ No | |
| ☐ Yes. Name of person Attach Bankruptcy Petition Preparer's | Notice |
| Declaration, and Signature (Official Fo | |
| | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and | |
| that they are true and correct. | |
| | |
| X X | |
| Sandra Rodriguez X Signature of Debtor 2 | |
| | <u> </u> |

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| Debtor 1 Sandra Rodriguez | | Case number (# known) |
|--|--|--|
| name: Description of property securing debt: | ☐ Retain the pro Reaffirmation | property and redeem it. Property and enter into a con Agreement. Property and [explain]: |
| or any unexpired personal pro n the information below. Do not | | xecutory Contracts and Unexpired Leases (Official Form 106G), fill re leases that are still in effect; the lease period has not yet ended. not assume it. 11 U.S.C. § 365(p)(2). |
| Describe your unexpired perso | nal property leases | Will the lease be assumed? |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Part 3: Sign Below | re that I have indicated my intention about ar | any property of my estate that secures a debt and any personal |
| Sandra Rodriguez Signature of Debtor 1 | | Signature of Debtor 2 |
| Date July 15, 2016 | Date | |

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United States Bankruptcy Court Northern District of Illinois

| In re | Sandra Rodriguez | Debtor(s) | Case No. Chapter | 7 |
|-------|---|--|---|---------------------------|
| | VERIFICA | TION OF CREDITOR MATE | RIX | |
| | | Number of Cred | itors: | 11 |
| | The above-named Debtor(s) hereby v (our) knowledge. | verifies that the list of creditors is | s true and | correct to the best of my |
| Date: | July 15, 2016 | Sandra Rodriguez Signature of Debtor | entermos (Till no trado a del transporti Constituto (Till no tradicio | |

Case 16-23331 Doc 1 Filed 07/20/16 Entered 07/20/16 15:57:46 Desc Main Document Page 13 of 54 Sandra Rodriguez Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,362.00 2,000.00 \$ 4.362.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,362.00 Multiply by 12 (the number of months in a year) 52,344,00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. IL Fill in the number of people in your household. 6 Fill in the median family income for your state and size of household. 103,721.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.

Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here I declare order penalty of perjury that the information on this statement and in any attachments is true and correct.

X Sandra Rodriguez

Signature of Debtor 1
Date July 15, 2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

| C | ase 16-23331 | Doc 1 | Filed 07/20/16 Document | Entered 07/20/16 15:57:46 Page 14 of 54 | 6 Desc Main | |
|---|-------------------------|-----------------|-------------------------|--|--------------------------------------|--|
| Fill in this infor | mation to identify yo | ur case: | | | | |
| Debtor 1 | Sandra C. Rod | | | | | |
| D 14 0 | First Name | Mic | dle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Mic | dle Name | Last Name | | |
| United States Ba | ankruptcy Court for the | e: NORTH | ERN DISTRICT OF ILL | INOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing | |
| Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 | | | | | | |
| information. Fill | out all of your schee | dules first; tl | nen complete the infor | ng together, both are equally responsib mation on this form. If you are filing amo ox at the top of this page. | | |
| Part 1: Sumn | narize Your Assets | | | | | |

Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 1.443.00 1c. Copy line 63, Total of all property on Schedule A/B..... 1,443.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 12,000.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 179,645.50 Your total liabilities \$ 191.645.50 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 5,162.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 5,603.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 15 of 54 Case number (if known) Debtor 1 Sandra C. Rodriguez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,362.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Tota | I claim |
|--|------|-----------|
| Trom rait 4 on ocheane E/r, copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 12,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 12,000.00 |

| Fill in this infor | mation to identify yo | ur case and this filing: | | |
|--|--|--|--|---|
| | | | | |
| Debtor 1 | Sandra C. Rod | | LastMana | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the | e: NORTHERN DISTRICT C | DF ILLINOIS | |
| | . , | | | _ |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | orm 106A/B | | | |
| Schedul | e A/B: Pro | perty | | 12/15 |
| | | | nce. If an asset fits in more than one category, list the | e asset in the category where you |
| information. If moi Answer every ques | re space is needed, atta stion. | ich a separate sheet to this forn | d people are filing together, both are equally responsing the top of any additional pages, write your named You Own or Have an Interest In | |
| | <u>`</u> | | | |
| _ | | able interest in any fesidence, b | ouilding, land, or similar property? | |
| No. Go to Pa | rt 2. | | | |
| ☐ Yes. Where | is the property? | | | |
| Part 2: Describe | Your Vehicles | | | |
| | | | icles, whether they are registered or not? Include G: Executory Contracts and Unexpired Leases. | de any vehicles you own that |
| someone else dri | ves. If you lease a vel | | le G: Executory Contracts and Unexpired Leases. | de any vehicles you own that |
| 3. Cars, vans, tr No Yes 4. Watercraft, ai Examples: Boa | ves. If you lease a vel | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation | le G: Executory Contracts and Unexpired Leases. | de any vehicles you own that |
| someone else dri 3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai | ves. If you lease a vel | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation | al vehicles, other vehicles, and accessories | de any vehicles you own that |
| Someone else dri 3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla | ves. If you lease a vel rucks, tractors, sport ircraft, motor homes ats, trailers, motors, pe | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation ersonal watercraft, fishing vess | al vehicles, other vehicles, and accessories | de any vehicles you own that |
| Someone else dri 3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla pages you ha | ves. If you lease a vel rucks, tractors, sport ircraft, motor homes ats, trailers, motors, pe | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation ersonal watercraft, fishing vest | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories | |
| Someone else dri 3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla pages you ha | ves. If you lease a vel rucks, tractors, sport ircraft, motor homes ats, trailers, motors, pe ar value of the portio ave attached for Part | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation ersonal watercraft, fishing vest | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for | |
| Someone else dri 3. Cars, vans, tr No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you ha Part 3: Describe Do you own or 6. Household gr Examples: Ma No | rucks, tractors, sport rucks, tractors, sport rucks, tractors, sport rucks, trailers, motors, per ar value of the portion ave attached for Part rucks. Your Personal and Hohave any legal or equation oods and furnishing ajor appliances, furniting ajor ajor ajor ajor ajor ajor ajor ajor | nicle, also report it on Schedu tutility vehicles, motorcycle ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your en t 2. Write that number here | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for | \$0.00 Current value of the portion you own? Do not deduct secured |
| Someone else dri 3. Cars, vans, tr No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you ha Part 3: Describe Do you own or 6. Household ge Examples: Ma | rucks, tractors, sport rucks, tractors, sport rucks, tractors, sport rucks, trailers, motors, per ar value of the portion ave attached for Part rucks. Your Personal and Hohave any legal or equation oods and furnishing ajor appliances, furniting ajor ajor ajor ajor ajor ajor ajor ajor | nicle, also report it on Schedu tutility vehicles, motorcycle , ATVs and other recreation ersonal watercraft, fishing vest on you own for all of your en t 2. Write that number here busehold Items uitable interest in any of the | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for | \$0.00 Current value of the portion you own? Do not deduct secured |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

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| | Case 16-23331 | Doc 1 | Filed 07/20/16 | | Desc Main |
|---|---|------------------------------------|-----------------------------|--|---|
| Debtor 1 | Sandra C. Rodriguez | | Document | Page 17 of 54 Case number (if known) | |
| | bles of value les: Antiques and figurines; other collections, memo | | | oks, pictures, or other art objects; stamp, coin | , or baseball card collections; |
| ■ No □ Yes. | Describe | | | | |
| Exampl | ent for sports and hobbie les: Sports, photographic, ex musical instruments | | other hobby equipment; | bicycles, pool tables, golf clubs, skis; canoes | and kayaks; carpentry tools; |
| ■ No □ Yes. | Describe | | | | |
| ■ No | ns ples: Pistols, rifles, shotguns Describe | s, ammunitior | n, and related equipment | t | |
| 11. Clothe | | , leather coat | s, designer wear, shoes. | . accessories | |
| ☐ No | Describe | | | | |
| | Necess | ary wearin | g apparel, shoes, an | nd coats | \$750.00 |
| 13. Non-fa Examp No Yes. 14. Any ot No Yes. 15. Add t | Give specific information | old items yo our entries fi | om Part 3, including a | ncluding any health aids you did not list ny entries for pages you have attached | \$1,250.00 |
| | | | | | |
| | scribe Your Financial Assets vn or have any legal or eq | | est in any of the follow | ring? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | oles: Money you have in you | | • | osit box, and on hand when you file your petiti | on |
| | | | | Cash | \$43.00 |
| | | | al accounts; certificates c | of deposit; shares in credit unions, brokerage titution, list each. | houses, and other similar |
| ■ Yes | | | Institution r | name: | |

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Case number (if known) Document

Debtor 1 Sandra C. Rodriguez

| | | 17.1. | Checking | Chase Bank | \$150.00 |
|----|---|-----------------------|--|--|--------------------------|
| 18 | . Bonds, mutual funds, or Examples: Bond funds, ir | | | okerage firms, money market accounts | |
| | ■ No □ Yes | | Institution or issuer r | name: | |
| 19 | Non-publicly traded stoo joint venture ■ No | ck and | interests in incorpo | orated and unincorporated businesses, including an interest in | an LLC, partnership, and |
| | ☐ Yes. Give specific infor | | about them ne of entity: | % of ownership: | |
| 20 | Negotiable instruments in Non-negotiable instrume. No | nclude p nts are t | ersonal checks, cash hose you cannot trai | tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them. | |
| | ☐ Yes. Give specific inform | | about them uer name: | | |
| 21 | Retirement or pension a Examples: Interests in IR No | | | 03(b), thrift savings accounts, or other pension or profit-sharing plan | าร |
| | ☐ Yes. List each account | | ely. of account: | Institution name: | |
| 22 | Examples: Agreements v | deposit | s you have made so | that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies | , or others |
| | ■ No □ Yes | | | Institution name or individual: | |
| 23 | | a period | dic payment of mone | ey to you, either for life or for a number of years) | |
| | ■ No □ Yes Issu | ıer nam | e and description. | | |
| 24 | 26 U.S.C. §§ 530(b)(1), 52 | | | ualified ABLE program, or under a qualified state tuition progra | ım. |
| | ■ No □ YesInst | itution n | ame and description | n. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25 | . Trusts, equitable or futu ■ No | ire inter | ests in property (of | ther than anything listed in line 1), and rights or powers exerci | sable for your benefit |
| | ☐ Yes. Give specific infor | mation | about them | | |
| 26 | | | | d other intellectual property ds from royalties and licensing agreements | |
| | ☐ Yes. Give specific infor | mation | about them | | |
| 27 | Licenses, franchises, ar Examples: Building perm■ No | | | es erative association holdings, liquor licenses, professional licenses | |
| | ☐ Yes. Give specific infor | mation | about them | | |
| M | oney or property owed to | you? | | | Current value of the |

Official Form 106A/B Schedule A/B: Property page 3

portion you own?
Do not deduct secured claims or exemptions.

Page 19 of 54

Case number (if known) Document Debtor 1 Sandra C. Rodriguez 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No $\hfill \square$ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$193.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Case 16-23331

Doc 1

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Desc Main

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| Debto | Sandra C. Rodriguez | | Case number (if known) | |
|--------|---|---------------|---------------------------|-----------------------|
| | o you have other property of any kind you did not already list? Examples: Season tickets, country club membership | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write tha | t number here | | \$0.00 |
| Part 8 | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$0.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,250.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$193.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$1,443.00 | Copy personal property to | tal \$1,443.00 |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,443.00

| | Cas | BE 10-23331 DUC. | Document | _ | Page 21 of 54 | .40 Desc Main |
|--------------------------|---|--|---|-----------------------------|--|--|
| Fill | l in this inform | ation to identify your case: | DUCHHEI | | 71 (II.)4 | |
| De | btor 1 | Sandra C. Rodriguez | | | | |
| | | First Name | Middle Name | L | _ast Name | |
| | btor 2 ouse if, filing) | First Name | Middle Name | L | _ast Name | |
| Un | ited States Ban | kruptcy Court for the: NOF | RTHERN DISTRICT OF | ILLIN | OIS | |
| | | | | | | |
| | nown) | | | | | ☐ Check if this is an amended filing |
| \bigcirc 1 | fficial For | m 106C | | | | |
| | | | rty Vou Cla | ım | ac Evernt | |
| <u> </u> | chedule | : C: The Prope | erty You Cla | 11111 | i as Exempt | 4/16 |
| the nee | property you list | ted on Schedule A/B: Propert attach to this page as many of | y (Official Form 106A/B) | as yo | our source, list the property that you | r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and |
| spe any fun exe | ecific dollar am applicable sta ds—may be un emption to a pa | ount as exempt. Alternative tutory limit. Some exemptic limited in dollar amount. Ho | ly, you may claim the fons—such as those for owever, if you claim ar | full fa r heal n exer | th aids, rights to receive certain b nption of 100% of fair market valu | ing exempted up to the amount of enefits, and tax-exempt retirement |
| Pa | rt 1: Identify | the Property You Claim as | Exempt | | | |
| 1. | Which set of | exemptions are you claimin | g? Check one only, eve | n if yo | our spouse is filing with you. | |
| | You are cla | ming state and federal nonba | inkruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | ☐ You are clai | ming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | |
| 2. | For any prope | erty you list on Schedule A/ | B that you claim as exe | empt, | fill in the information below. | |
| | Brief description of the property and line on | | Current value of the | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | Schedule A/B ti | nat lists this property | portion you own Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | | us household goods and | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| | furnishings Line from Sche | edule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Necessary w | vearing apparel, shoes, | \$750.00 | | \$750.00 | 735 ILCS 5/12-1001(a) |
| | Line from Sche | edule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash Line from Sche | edule A/B: 16.1 | \$43.00 | | \$43.00 | 735 ILCS 5/12-1001(b) |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: C | hase Bank edule A/B: 17.1 | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(b) |
| | Con | | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | | ing a homestead exemption ustment on 4/01/19 and every | | | iled on or after the date of adjustmer | nt.) |

No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Debtor 1 Sandra C. Rodriguez

| Fill in this information to identify your case: | | | | | |
|---|------------------|-------------------|-------------|--|-----------------------|
| Debtor 1 | Sandra C. Rodrig | uez | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| Filli | n this informa | ation to identify your | case: | Documen | Paue 74 UI: |)4 | | |
|---|---|---|--|--|--|---|---|--|
| Deb | tor 1 | Sandra C. Rodrig | uez | | | | | |
| Dob | tor O | First Name | Midd | le Name | Last Name | _ | | |
| | tor 2 ise if, filing) | First Name | Midd | le Name | Last Name | | | |
| Unite | ed States Bank | cruptcy Court for the: | NORTHE | RN DISTRICT OF ILL | INOIS | | | |
| _ | | | | | | _ | | |
| (if kno | e number | | | | | | _ | if this is an ed filing |
| Offi | cial Form | 106E/F | | | | | | |
| Scł | nedule E/ | F: Creditors W | hο Haν | e Unsecured | Claims | | | 12/15 |
| iny e Sched Sched eft. A name | xecutory contra dule G: Executo dule D: Creditor ttach the Contil and case numb | , | that could i ired Leases ured by Pro e. If you ha | result in a claim. Also lis (Official Form 106G). Do perty. If more space is n we no information to rep | st executory contract o not include any cre eeded, copy the Part | ts on Schedule A/B: F editors with partially s t you need, fill it out, i | roperty (Official Form ecured claims that a number the entries ir | n 106A/B) and on re listed in the boxes on the |
| Part | | of Your PRIORITY Un | | | | | | |
| | | s have priority unsecure | d claims ag | ainst you? | | | | |
| | No. Go to Par Yes. | l Z. | | | | | | |
| 2. L | List all of your p | priority unsecured claims of claim it is. If a claim ha claims in alphabetical orde | ıs both priori | ty and nonpriority amounts | s, list that claim here a | and show both priority a | nd nonpriority amount | s. As much as |
| | | an one creditor holds a pa | | | | o priority unsecured cit | ams, in out the contin | idation rage of |
| (| For an explanation | on of each type of claim, s | see the instru | actions for this form in the | instruction booklet.) | Total claim | Priority | Nonpriority |
| 1 | l | | | | | • | amount | amount |
| 2.1 | Internal F Priority Cred | Revenue Service | | Last 4 digits of accoun | t number | \$8,000.00 | \$8,000.00 | \$0.00 |
| | Filolity Cred | iitoi s ivairie | | When was the debt inc | urred? | | | |
| | | City, MO 64999 | | As of the date you file | the claim is Check of | all that apply | | |
| | | eet City State Zlp Code the debt? Check one. | | As of the date you file, Contingent | the claim is: Check a | ын тат арріу | | |
| | ■ Debtor 1 onl | V | | ☐ Unliquidated | | | | |
| | Debtor 2 onl | • | | ☐ Disputed | | | | |
| | Debtor 1 and | • | | Type of PRIORITY unse | ecured claim: | | | |
| | _ | of the debtors and anothe | ar. | ☐ Domestic support ob | | | | |
| | _ | s claim is for a commur | | Taxes and certain oth | _ | government | | |
| | | bject to offset? | my debt | ☐ Claims for death or p | - | - | | |
| | ■ No | • | | Other. Specify | | | | |
| | ☐ Yes | | | Pas | st due federal ta | xes | | |
| 2.2 | Ctata of I | Ilinaia Dant Baya | nua | Look A digito of cooper | 4 mmh.a.r | ¢4 000 00 | ¢4 000 00 | ¢0.00 |
| 2.2 | Priority Cred | | nue | Last 4 digits of accoun | | \$4,000.00 | \$4,000.00 | \$0.00 |
| | Springfie | et City State Zlp Code | | A = = £ { = = = 1 = 1 = 1 = 1 = 1 | the elektrical of | | | |
| | | the debt? Check one. | | As of the date you file, Contingent | the claim is: Check a | all that apply | | |
| | ■ Debtor 1 onl | | | | | | | |
| | Debtor 2 onl | • | | ☐ Unliquidated☐ Disputed☐ | | | | |
| | Debtor 1 and | | | Type of PRIORITY unse | ecured claim: | | | |
| | _ | of the debtors and anothe | \r_ | Domestic support ob | | | | |
| | | | | ■ Taxes and certain otl | | government. | | |
| | | s claim is for a commur bject to offset? | iity debt | ☐ Claims for death or p | | - | | |
| | No | 2,001 10 011361 1 | | Other. Specify | oroonar injury write yo | TOTO IIIIONICAIGU | | |
| | ☐ Yes | | | | st due state taxe | <u> </u> | | |

Debtor 1 Sandra C. Rodriguez

Document Page 25 of 54
Case number (if know)

| | List All of Your NONPRIORITY Unsecu | | |
|-----|--|---|-------------------------|
| | Do any creditors have nonpriority unsecured claim | • | |
| | No. You have nothing to report in this part. Submit | this form to the court with your other schedules. | |
| ١ | Yes. | | |
| t | unsecured claim, list the creditor separately for each cl | alphabetical order of the creditor who holds each claim. If a creditor has more than aim. For each claim listed, identify what type of claim it is. Do not list claims already included creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Common control of the creditor who holds each claim. If a creditor has more than type of claim it is. | uded in Part 1. If more |
| | | | Total claim |
| 4.1 | ATG Credit. LLC | Last 4 digits of account number | \$44.00 |
| | Nonpriority Creditor's Name PO Box 14895 Chicago, IL 60614 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Collections for Metropolitan Advanced Rradiology | |
| 4.2 | CMRE Finance | Last 4 digits of account number | \$399.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 3075 E. Imperial High Way | when was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify collections | |

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Debtor 1 Sandra C. Rodriguez Case number (if know) 4.3 \$8,448.00 **CMRE Finance** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3075 E. Imperial High Way Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collections ☐ Yes **CMRE Finance** 4.4 Last 4 digits of account number \$1,529.00 Nonpriority Creditor's Name When was the debt incurred? 3075 E. Imperial High Way Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections ☐ Yes 4.5 Matthew Sapaula L703 \$154,758.50 Last 4 digits of account number Nonpriority Creditor's Name c/o Jessica C. Marshall, Esq When was the debt incurred? 2016 115 S. LaSalle St. 26th FL Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify judgment / citation ☐ Yes

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| Debto | Sandra C. Rodriguez | Case number (if know) | |
|-------|---|---|------------|
| 4.6 | Northwest Collectors, Inc. | Last 4 digits of account number | \$196.00 |
| | Nonpriority Creditor's Name 3601 Algonquin Rd. Suite 232 | When was the debt incurred? | |
| | Rolling Meadows, IL 60008 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Collections for Illinois Pathology Associates | |
| 4.7 | NW Collector Nonpriority Creditor's Name | Last 4 digits of account number | \$196.00 |
| | 3601 Algonquin Road Rolling Meadows, IL 60008 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify collections | |
| 4.8 | Sallie Mae Nonpriority Creditor's Name | Last 4 digits of account number | \$3,488.00 |
| | P.O. Box 12109 Kileen, TX 76547-2109 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify student loan | |

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| Stanislaus Credit Control | Last 4 digits of account number | \$687.00 |
|--|---|----------|
| Nonpriority Creditor's Name | | φ007.00 |
| 914 14th St | When was the debt incurred? | |
| Modesto, CA 95354 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Oneck all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify collections for CEP America Illinois | |
| Stanislaus Credit Control | Last 4 digits of account number | \$605.00 |
| Nonpriority Creditor's Name | | <u>-</u> |
| 914 14th St | When was the debt incurred? | |
| Modesto, CA 95354 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | 76 of the date you me, the claim is: of book an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify collections for CEP America Illinois | |
| Stanislaus Credit Control | Last 4 digits of account number | \$605.00 |
| Nonpriority Creditor's Name | | <u>-</u> |
| 914 14th St | When was the debt incurred? | |
| Modesto, CA 95354 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The state jet ins, the state is onoth all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| □ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify collections for CEP America Illinois | |
| | - p | |

| U.S. Dept. Education | Last 4 digits of account number | \$3. |
|--|---|------|
| Nonpriority Creditor's Name PO Box 4222 | When was the debt incurred? | Ψ3, |
| lowa City, IA 52244-4222 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify student loan | |
| U.S. Dept. Education | Last 4 digits of account number | \$4, |
| Nonpriority Creditor's Name | | |
| PO Box 4222 | When was the debt incurred? | |
| lowa City, IA 52244-4222 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify student loan | |
| U.S. dept. Education | Last 4 digits of account number | \$1, |
| Nonpriority Creditor's Name | | Ψ1, |
| PO Box 4222 | When was the debt incurred? | |
| lowa City, IA 52244-4222 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | and date you me, the staint is. Oneon an anat appry | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other. Specify student loan | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Sandra C. Rodriguez

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 12,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 12,000.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 179,645.50 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 179,645.50 |

| | | 1700.111110 | 111 FAUE 3 L UI 34 | |
|---------------------|--------------------------|-------------------|--------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Sandra C. Rodrig | uez | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | J.,, | | State | | |

| | | Docume | <u>nt Page 32 (</u> | N 54 | |
|--------------------------------|--|--|---------------------------|---|--|
| Fill in this i | information to identify your | | | | |
| Debtor 1 | Sandra C. Rodrig | uez | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | . , | | | | |
| Case numb (if known) | er | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106H | | | | |
| | ule H: Your Cod | ehtors | | | 12/15 |
| Jenea | die II. Tour oou | CDIOIS | | | 12/13 |
| ill it out, an our name | nd number the entries in the and case number (if known) | boxes on the left. Attach . Answer every question | the Additional Page t | to this page. On the to | needed, copy the Additional Page, p of any Additional Pages, write |
| 1. Do y | ou have any codebtors? (If | you are filing a joint case, o | do not list eitner spouse | e as a codeptor. | |
| ■ No □ Yes | | | | | |
| Arizona | a, California, Idaho, Louisiana | | | | ty states and territories include |
| | Go to line 3. Did your spouse, former sport | use, or legal equivalent live | e with you at the time? | | |
| in line : Form 1 out Co | 2 again as a codebtor only i 06D), Schedule E/F (Officia lumn 2. | f that person is a guaran | tor or cosigner. Make | sure you have listed t 06G). Use Schedule D, | ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor ame, Number, Street, City, State and Z | P Code | | Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, lin | ne |
| N | lame | | | ☐ Schedule E/F, | line |
| | | | | ☐ Schedule G, lir | ne |
| | Jumber Street | Chata | ZID Code | | |
| | Dity | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, lir | ne |
| | lame | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | ne |
| | lumber Street | | | _ | |
| C | City | State | ZIP Code | | |

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| E HI | in this information to identify your c | 200 | | | | Ī | | | |
|-------------|--|----------------------------|---|--------------|-------|--------------------------------------|----------------------|--|----------|
| | btor 1 Sandra C. R | | | | | | | | |
| | btor 2 puse, if filing) | | | | | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRI | CT OF ILLINOIS | | | | | | |
| | se number nown) | | - | | | Check if this in | | | |
| | | | | | | | | wing postpetition e following date: | |
| <u>O</u> | fficial Form 106I | | | | | MM / DD/ | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment Fill in your employment | ır spouse is not filing w | ith you, do not incluing ith you, do not incluing ith you include | ıde infor | mati | on about your sp I case number (i | ouse. If f known) | more space is . Answer every | needed, |
| | information. | | Debtor 1 | | | _ | | n-filing spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | | | ■ Emp | oloyed employed | d | |
| | employers. | Occupation | Independent In | surance | e Ag | ent Home | Inspect | tor | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed t | here? | | | | | | |
| Pa | rt 2: Give Details About Mor | nthly Income | | | | | | | |
| | imate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | report for | any | line, write \$0 in th | e space. | Include your nor | n-filing |
| | ou or your non-filing spouse have mee space, attach a separate sheet to | | ombine the information | on for all e | emplo | oyers for that pers | on on the | e lines below. If | you need |
| | | | | | | For Debtor 1 | | Debtor 2 or filing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | 2,000.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lii | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | 2,000.00 | |

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| Deb | tor 1 | Sandra C. Rodriguez | | Cas | e number (if kno | wn) | | | | |
|-----|--|--|--|-------------------------------|--------------------------------|----------------------------|----------------------|---------------|--|------------------|
| | | | | Fo | or Debtor 1 | | | ebtor : | | |
| | Cop | y line 4 here | 4. | \$ | 0. | 00 | \$ | | 00.00 | _ |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations | 5a. 5b. 5c. 5d. 5e. 5f. | \$ \$ \$ \$ \$ | 0. 0. 0. | 00 00 00 00 00 | \$ \$ \$ \$ | | 0.00 0.00 0.00 0.00 0.00 | - |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g. 5h.⊣ | \$ - \$ | | 00 | — | | 0.00 | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 511.4 6. | - φ __ \$ | | 00 | + ⊅ \$ | | 0.00 | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | Ψ ₋ | | 00 | \$ | 2 (| 0.00 | _ |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: | 8a. 8b. 8c. 8d. 8e. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 3,162. 0. 0. 0. 0. | | \$ \$ \$ \$ | 2,1 | 0.00 0.00 0.00 0.00 0.00 0.00 | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 3,162. | 00 | \$ | | 0.0 | 0 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 3,162.00 | + \$_ | 2,00 | 00.00 | = \$ _ | 5,162.00 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depen | | | | | hedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | 12. | \$ | 5,162.00 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form' No. Yes Explain: | ? | | | | | | Combi month | ned ly income |

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| | in this informs | | | | | | | | |
|-------------------|--|--|-------------------------------------|---|---|------------|-------|------------------------------|-------------------------------|
| | | ation to identify yo | ur case: | | | | | | |
| Deb | tor 1 | Sandra C. Ro | odriguez | | | | | if this is: n amended filing | |
| Deb | otor 2 | | | | | | | _ | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | _ | | | the following date: |
| Unit | ed States Bankr | ruptcy Court for the | NORTH | IERN DISTRICT OF ILLIN | OIS | | M | M / DD / YYYY | |
| | e number nown) | | | | | | | | |
| Of | fficial Fo | orm 106J | | | | | | | |
| So | chedule | J: Your I | Exper | ises | | | | | 12/1 |
| Be info nur | as complete ormation. If m mber (if know | and accurate as nore space is nearn). Answer ever | possible eded, atta y questio | If two married people ar ch another sheet to this | | | | | |
| Par 1. | ls this a joir | ribe Your House nt case? | noid | | | | | | |
| | ■ No. Go to | | | oto household? | | | | | |
| | ☐ res. Doe | | n a separ | ate nousenoid? | | | | | |
| | = :: | - | t file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | hold of D | ebtor | 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | | □ No |
| | dependents | names. | | | daughter | | | 9 | ■ Yes |
| | | | | | dabta | | | 45 | □ No |
| | | | | | daughter | | | 15 | ■ Yes |
| | | | | | daughter | | | 15 | □ No ■ Yes |
| | | | | | dauginei | | | | ■ Yes □ No |
| | | | | | son | | | 19 | ■ Yes |
| 3. | | penses include | | No | | | | | . 55 |
| | | f people other th d your depender | nan _ | Yes | | | | | |
| Dor | | | | v Evnence | | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | |
| Incl | lude expense | es paid for with r | on-cash | government assistance i | f you know | | | | |
| | ficial Form 10 | | a nave inc | luded it on Schedule I: \ | rour income | - 1 | _ | Your expe | enses |
| 4. | | or home owners | | ses for your residence. I | nclude first mortgage | e 4. | \$ | | 850.00 |
| | . , | ded in line 4: | J | | | | - | | |
| | | estate taxes | | | | 4a. | \$ | | 0.00 |
| | | erty, homeowner's | , or renter | 's insurance | | 4a. 4b. | | | 0.00 |
| | 4c. Home | maintenance, re | pair, and ι | ıpkeep expenses | | 4c. | | | 0.00 |
| _ | | owner's associat | | | and a second track | 4d. | - | | 0.00 |
| 5. | Additional r | mortgage payme | ents for yo | our residence , such as ho | me equity loans | 5. | \$ | | 0.00 |

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| or 1 Sandra C. | Rodriguez | Case num | ber (if known) | |
|------------------------|--|--------------|----------------|-----------------------|
| Utilities: | | | | |
| | eat, natural gas | 6a. | \$ | 265.00 |
| • | er, garbage collection | 6b. | · · | 0.00 |
| | cell phone, Internet, satellite, and cable services | 6c. | | 340.00 |
| 6d. Other. Spec | · | 6d. | | 0.00 |
| Food and housel | • | 7. | | 800.00 |
| | ildren's education costs | 7. 8. | \$ | |
| | | | * | 0.00 |
| | , and dry cleaning | 9. | · | 130.00 |
| • | oducts and services | 10. | · | 70.00 |
| Medical and dent | • | 11. | \$ | 30.00 |
| | nclude gas, maintenance, bus or train fare. | 12. | c | 400.00 |
| Do not include car | | | | |
| | ubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | butions and religious donations | 14. | \$ | 50.00 |
| Insurance. | | | | |
| | urance deducted from your pay or included in lines 4 or 20. | . – | • | _ |
| 15a. Life insuran | | 15a. | | 150.00 |
| 15b. Health insur | ance | 15b. | | 350.00 |
| 15c. Vehicle insu | rance | 15c. | \$ | 268.00 |
| 15d. Other insura | ance. Specify: | 15d. | \$ | 0.00 |
| | ude taxes deducted from your pay or included in lines 4 or 20. | | | 2.00 |
| | ment of state and federal taxes | 16. | \$ | 500.00 |
| Installment or lea | | | • | 222100 |
| 17a. Car paymer | | 17a. | \$ | 0.00 |
| 17b. Car paymer | | 17b. | · — | 0.00 |
| ' ' | ify: Contribution to son's college expenses | 17b. | · | 250.00 |
| | | 17d. | · | |
| 17d. Other. Spec | • - | | | 0.00 |
| | f alimony, maintenance, and support that you did not report as | | ¢ | 0.00 |
| | our pay on line 5, Schedule I, Your Income (Official Form 106I). | . 10. | | |
| | you make to support others who do not live with you. | 40 | \$ | 0.00 |
| Specify: | to a company of the body day the second of the form of the Company | 19. | | |
| | ty expenses not included in lines 4 or 5 of this form or on Sch | | | 0.00 |
| 20a. Mortgages | | 20a. | | 0.00 |
| 20b. Real estate | | 20b. | · | 0.00 |
| | meowner's, or renter's insurance | 20c. | · | 0.00 |
| 20d. Maintenanc | e, repair, and upkeep expenses | 20d. | | 0.00 |
| 20e. Homeowner | 's association or condominium dues | 20e. | \$ | 0.00 |
| Other: Specify: | Student Loans | 21. | +\$ | 350.00 |
| | regular business expenses | | +\$ | 800.00 |
| J | -gaia. Baomeoc expeniedo | | | 555.00 |
| Calculate your m | • • | | | |
| 22a. Add lines 4 th | rough 21. | | \$ | 5,603.00 |
| 22b. Copy line 22 | (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | and 22b. The result is your monthly expenses. | | \$ | 5,603.00 |
| / NGG III IO ZZG | and LES. The result to your mentally expenses. | | | 3,003.00 |
| Calculate your m | onthly net income. | | | |
| 23a. Copy line 12 | 2 (your combined monthly income) from Schedule I. | 23a. | \$ | 5,162.00 |
| | nonthly expenses from line 22c above. | 23b. | | 5,603.00 |
| | , , , | | | 0,000.00 |
| 23c. Subtract voi | ur monthly expenses from your monthly income. | | | |
| | s your monthly net income. | 23c. | \$ | -441.00 |
| 70001110 | , | | 1 | |
| Do you expect ar | increase or decrease in your expenses within the year after y | ou file this | s form? | |
| For example, do you | expect to finish paying for your car loan within the year or do you expect you | | | e or decrease because |
| modification to the te | rms of your mortgage? | | | |
| ■ No. | | | | |
| | Evolain here: | | | |
| ☐ Yes. | Explain here: | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------------------|--|--------------------------|-------------------------|---------------------------|--|
| Debtor 1 | Sandra C. Rodri | quez | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | rm 106Dec | | | | |
| Declara | tion About a | an Individual | Debtor's S | chedules | 12/15 |
| years, or both. | ey or property by fraud 18 U.S.C. §§ 152, 1341, gn Below | | rruptcy case can resul | t in fines up to \$250,00 | 00, or imprisonment for up to 20 |
| Did you p | pay or agree to pay som | eone who is NOT an attor | ney to help you fill ou | t bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | nalty of perjury, I declare are true and correct. | that I have read the sum | mary and schedules fi | iled with this declaratio | on and |
| X /s/ Sa | ındra C. Rodriguez | | X | | |
| Sand | ra C. Rodriguez ture of Debtor 1 | | Signature | of Debtor 2 | |

Date _____

Date **July 20, 2016**

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| - | l in this inform | otion to identify you | | | | |
|------------|---------------------------|--|--|---|--|---|
| | | ation to identify you | | | | |
| De | ebtor 1 | Sandra C. Rodri | guez Middle Name | Last Name | | |
| De | ebtor 2 | · iiot rtailio | made Name | 2451.141110 | | |
| (Sp | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Ur | nited States Ban | kruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Ca | se number | | | | | |
| (if k | mown) | | | | | Check if this is an |
| | | | | | | amended filing |
| \bigcirc | Kisial Fam | 107 | | | | |
| _ | fficial For | | A ((= ! | | \ | |
| 51 | atement | of Financiai | Affairs for Individ | duals Filling for B | sankruptcy | 4/10 |
| | | | ble. If two married people a attach a separate sheet to | | | |
| | |). Answer every que | | uns form. On the top of an | y additional pages, write yo | our name and case |
| Pa | rt 1: Give De | etails About Your Ma | rital Status and Where You | Lived Before | | |
| | | | | | | |
| 1. | what is your | current marital statu | is r | | | |
| | Married | | | | | |
| | ☐ Not marri | ied | | | | |
| 2. | During the las | st 3 years, have you | lived anywhere other than v | where you live now? | | |
| | □ No | | | | | |
| | _ | all of the places you I | ived in the last 3 years. Do no | ot include where you live nov | ٧. | |
| | Debtor 1 Price | or Address: | Dates Debtor 1 | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 |
| | 5440 F-! F | Inc. Acce | lived there | | | lived there |
| | 5413 Fair E Western Sr | ıms Ave orings, IL 60558 | From-To: | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| | | 3 -, | | | | |
| 3. sta | tes and territorie | s include Árizona, Ca | ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of | vada, New Mexico, Puerto R | | |
| | | te sure you iiii out oor | leddie 11. Todi Codebiois (Oi | ilciai i oiiii 10011). | | |
| Pa | rt 2 Explain | the Sources of You | r Income | | | |
| 4. | Fill in the total | amount of income yo | nployment or from operating u received from all jobs and a have income that you receive | all businesses, including part | -time activities. | endar years? |
| | □ No | | | | | |
| | Yes. Fill i | n the details. | | | | |
| | | | D. () | | D.L. | |
| | | | Debtor 1 | Cuana in a sure | Debtor 2 | Cuenci in comme |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$18,972.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Case number (if known) Debtor 1 Sandra C. Rodriguez

| | | | | Debtor 1 | | Debtor 2 | |
|----|---|--|--|---|--|---|--|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of incon Check all that app | |
| | r last caler anuary 1 to | ndar year: December | 31, 2015) | ☐ Wages, commissions, bonuses, tips | \$6,557.34 | ☐ Wages, commi bonuses, tips | ssions, |
| | | | | Operating a business | | ☐ Operating a bu | siness |
| | | dar year be December | | ☐ Wages, commissions, bonuses, tips | \$39,673.00 | ☐ Wages, commi bonuses, tips | ssions, |
| | | | | Operating a business | | ☐ Operating a bu | siness |
| 5. | Include in and other winnings. List each | come regard public bene If you are fil | dless of wheth fit payments; ling a joint cas the gross inco | | imples of other income are sest; dividends; money collerou received together, list it | alimony; child support cted from lawsuits; roy only once under Debt | |
| | □ 1es. | riii iii tile ut | cialis. | | | | |
| | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of incon Describe below. | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | t Certain Pa | ayments You | Made Before You Filed for I | Bankruptcy | | |
| 6. | Are eithe No. | Neither D individual During the No. Yes | ebtor 1 nor D primarily for a e 90 days befo Go to line 7 List below e paid that cru not include | personal, family, or househol re you filed for bankruptcy, di each creditor to whom you pai | Imer debts. Consumer debtd purpose." d you pay any creditor a totatd a total of \$6,425* or morests for domestic support oblinis bankruptcy case. | al of \$6,425* or more? in one or more paym gations, such as child | ents and the total amount you support and alimony. Also, do |
| | ■ Yes. | | | r both have primarily consure you filed for bankruptcy, di | | al of \$600 or more? | |
| | | ■ No. | Go to line 7 | | | | |
| | | □ Yes | include pay | each creditor to whom you pai ments for domestic support of this bankruptcy case. | | | u paid that creditor. Do not so, do not include payments to a |
| | Creditor | 's Name an | d Address | Dates of payme | nt Total amount | Amount you | Was this payment for |

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| 7. | Within 1 year before you filed for bankruptour Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider. | ortners; relatives of any gen control, or owner of 20% o | eral partners; partner r more of their voting | erships of which g securities; an | h you are a generand any managing a | al partner; corporations gent, including one for |
|-----|---|---|--|--------------------------------------|-------------------------------------|---|
| | Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount paid | Amount yo | | this payment |
| 3. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos | | • | any property c | on account of a d | ebt that benefited an |
| | No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount yo still ow | | this payment litor's name |
| Par | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | Case title | Nature of the case | Court or agency | | Status of th | ne case |
| | Case number Matthew Sapaula v. Sandra Rodriguez 2015 L 703 | Judgment / Du Page County - Citation To Eighteenth Judicial Cir Discover Assets Wheaton, IL 60187 | | ☐ On appe | ■ Pending □ On appeal □ Concluded | |
| | Sandra Rodriguez v. Matthew Sapaula | Child Support Enforcement | Cook County 1 Richard J.Dale Chicago, IL 606 | y Center | Pending On appe | eal |
| 10. | Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | oreclosed, ga | rnished, attached | d, seized, or levied? |
| | Creditor Name and Address | Describe the Property | | D | ate | Value of the |
| | | Explain what happened | I | | | property |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from yo accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | amounts from your | |
| | Creditor Name and Address | Describe the action the | creditor took | | ate action was aken | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assi | gnee for the bend | efit of creditors, a |

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Case number (if known) Document Debtor 1 Sandra C. Rodriguez

| Pai | tt 5: List Certain Gifts and Contributions | | | |
|-----|--|--|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | otcy, did you give any gifts with a total value of more t | han \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor | otcy, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Dates you contributed | Value |
| Pai | tt 6: List Certain Losses | | | |
| 15. | or gambling? | cy or since you filed for bankruptcy, did you lose any | thing because of the | it, fire, other disaster, |
| | Yes. Fill in the details. | | Date of your | Value of property |
| | how the loss occurred | Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pai | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or pr | cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? eparers, or credit counseling agencies for services require | | rty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | The Burns Law Firm P.C. 53 W. Jackson Blvd. Suite 724 Chicago, IL 60604 | \$ 335.00 for filing fee and \$ 333.00 towards attorney fees | July 15, 2016 | \$668.00 |
| 17. | | cy, did you or anyone else acting on your behalf pay ors or to make payments to your creditors? ou listed on line 16. | or transfer any prope | rty to anyone who |
| | ■ No | | | |
| | ☐ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

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Case number (if known) Document

Debtor 1 Sandra C. Rodriguez

| 18. | Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers may include gifts and transfers that you have already No Yes. Fill in the details. | isiness or financial aff de as security (such as | airs? the granting of a s | | | |
|-----|--|---|------------------------------|--------------|--|---|
| | Person Who Received Transfer Address Person's relationship to you | Description and property transfer | | payme | be any property or ents received or debts a exchange | Date transfer was made |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prod No ☐ Yes. Fill in the details. | | ny property to a s | self-settled | d trust or similar device o | of which you are a |
| | Name of trust | Description and | value of the prop | erty trans | ferred | Date Transfer was made |
| | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details. | , were any financial ac | ccounts or instru | ments he | d in your name, or for yo | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accou instrument | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 yeash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, S | cess to it? | | osit box or other deposi | Do you still have it? |
| 22. | Have you stored property in a storage unit of the No Yes. Fill in the details. | State and ZIP Code) r place other than you | r home within 1 y | year befor | e you filed for bankrupto | :y? |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe (| the contents | Do you still have it? |
| Par | t 9: Identify Property You Hold or Control f | or Someone Else | | | | |
| 23. | Do you hold or control any property that son for someone. No Yes. Fill in the details. | neone else owns? Incl | ude any property | y you borr | owed from, are storing f | or, or hold in trust |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe t | the property | Value |
| | t 10: Give Details About Environmental Info | rmation | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com

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Case number (if known) Document

Debtor 1 Sandra C. Rodriguez

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | · | or similar term. | | | | |
|---|--|--|---|--|--|--|
| ort a | II notices, releases, and proceedings tha | it you know about, regardless of wher | n the | ey occurred. | | |
| Has | any governmental unit notified you that | you may be liable or potentially liable | und | der or in violation of an environme | ental law? | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| 25. Have you notified any governmental unit of any release of hazardous material? | | | | | | |
| ■ No □ Yes. Fill in the details. | | | | | | |
| Name of site Address (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| Hav | e you been a party in any judicial or adm | inistrative proceeding under any envi | ironr | mental law? Include settlements a | and orders. | |
| ■ No □ Yes. Fill in the details. | | | | | | |
| _ | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | |
| 11: | Give Details About Your Business or 0 | Connections to Any Business | | | | |
| Witl | — hin 4 years before you filed for hankrupt | cy, did you own a business or have an | v of | the following connections to any | / husiness? | |
| | | | • | | , | |
| | _ | • | | • | | |
| | _ | | | , | | |
| | _ | ecutive of a corporation | | | | |
| | | | | | | |
| | | | | | | |
| _ _ | | | S. | | | |
| Bu: | | Describe the nature of the business | | Employer Identification numbe | r | |
| | | Name of accountant or bookkeeper | | | number or ITIN. | |
| | | cy, did you give a financial statement t | to ar | | ude all financial | |
| | No | | | | | |
| | Yes. Fill in the details below. | | | | | |
| Name Address (Number, Street, City, State and ZIP Code) | | | | | | |
| | Has Nal Nal Hav Nal Nal Hav Bull Nal Hav Bull Nal Hav Bull Nal Nal With Street Nal | Has any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of a No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adm No Yes. Fill in the details. Case Title Case Number 11: Give Details About Your Business or Company of the Street of S | Has any governmental unit notified you that you may be liable or potentially liable No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Covernmental unit Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) No Address (Number, Street, City, State and ZIP Code) Till: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have ar A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | No No No No No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any environs and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Ill: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of A sole proprietor or self-employed in a trade, profession, or other activity, eith A member of a limited liability company (LLC) or limited liability partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement to an institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-23331 Doc 1 Filed 07/20/16 Entered 07/20/16 15:57:46 Page 44 of 54 Case number (if known) Document

Debtor 1 Sandra C. Rodriguez

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sandra C. Rodriguez Signature of Debtor 2 Sandra C. Rodriguez Signature of Debtor 1 Date July 20, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| | | | • | |
|---|--|---|--|--|
| Fill in this infor | mation to identify your ca | ase: | | |
| Debtor 1 | Sandra C. Rodrigu | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| If you are an ind creditors hav you have leas You must file thi whiche on the If two married po | lividual filing under chap re claims secured by you sed personal property an is form with the court wite ever is earlier, unless the form eople are filing together ind date the form. | ter 7, you must fi r property, or d the lease has r thin 30 days after court extends the in a joint case, bo | | et for the meeting of creditors, ne creditors and lessors you list nformation. Both debtors must |
| | our name and case num our Creditors Who Have | | | |
| information be | | | D: Creditors Who Have Claims Secured by Propert What do you intend to do with the property tha | |
| | The second secon | | secures a debt? | as exempt on Schedule C? |
| Creditor's | | | □ O man and another account to | |
| name: | | | ☐ Surrender the property. | □ No |
| name. | | | Retain the property and redeem it. | ☐ Yes |
| Description of | f | | ☐ Retain the property and enter into a Reaffirmation Agreement. | — 103 |
| property | | | Retain the property and [explain]: | |
| securing debt | : | | | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| Description of | f | | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |

Official Form 108

Creditor's

property

Creditor's

name:

property

securing debt:

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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| Debtor 1 Sandra C. Rodriguez name: Description of property securing debt: | | Case number (if kno | wn) |
|---|---|---|-------------------------------------|
| | | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | □ Yes |
| or any un | rmation below. Do not list real estate l | ty Leases you listed in Schedule G: Executory Contracts and Unexp leases. Unexpired leases are leases that are still in effect; ty lease if the trustee does not assume it. 11 U.S.C. § 365(| the lease period has not yet ended. |
| Describe : | your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's no Description Property: | ame: n of leased | | □ No □ Yes |
| Lessor's na Description Property: | ame: n of leased | | □ No |
| Lessor's na Description Property: | ame: n of leased | | □ No |
| Lessor's na Description Property: | ame: n of leased | | □ No □ Yes |
| Lessor's na Description Property: | ame: n of leased | | □ No □ Yes |
| Lessor's na Description Property: | ame: n of leased | | □ No □ Yes |
| Lessor's na Description Property: | ame: n of leased | | □ No □ Yes |
| Jnder pen property th X /s/ S Sand | Sign Below alty of perjury, I declare that I have indicated in the subject to an unexpired lease. andra C. Rodriguez dra C. Rodriguez ature of Debtor 1 | dicated my intention about any property of my estate that X Signature of Debtor 2 | |
| Date | July 20, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Document

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Sandra C. Ro | driguez | | Case 1 | Jo. | | |
|----------------|---|--|---|--|--|--|--|
| | | | Debtor(s) | Chapte | | | |
| | DIS | SCLOSURE OF | COMPENSATION OF ATTOR | NEV FOR | DERTOD(S) | | |
| | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | |
| | For legal servic | es, I have agreed to acc | ept | \$ | 1,000.00 | | |
| | Prior to the filin | ng of this statement I ha | ve received | . • | 333.00 | | |
| | Balance Due | | | | 667.00 | | |
| 2. \$_ | | filing fee has been paid | | | | | |
| 3. T | he source of the cor | mpensation paid to me | was: | | | | |
| | Debtor | Other (specify): | | | | | |
| 4. Ti | ne source of compe | nsation to be paid to me | e is: | | | | |
| | Debtor | ☐ Other (specify): | | | | | |
| 5. | I have not agreed | to share the above-disc | closed compensation with any other person unl | less they are me | mhers and associat | es of my law S | |
| a. a. b. c. d. | I have agreed to so copy of the agreed to so copy of the agreed to so copy of the agreed to the agreement of the above Analysis of the deference and fill Representation and fill Representation of [Other provisions a Negotiation reaffirmation preparation advising clicity's integreement with the Representation dischargeal | share the above-disclose ment, together with a list re-disclosed fee, I have a bor's financial situation ling of any petition, schothe debtor at the meeting as needed] Is with secured creed on agreements and a ling of motion ient with regard to derests regarding any adoptor(s), the above-dition of the debtors is | ed compensation with a person or persons who st of the names of the people sharing in the contagreed to render legal service for all aspects of a n, and rendering advice to the debtor in determined a number of affairs and plan which may of creditors and confirmation hearing, and a ditors to reduce to market value; exemplications as needed with regard to runs pursuant to 11 USC 522(f)(2)(A) for a defenses available for motions to modify such motions. iisclosed fee does not include the following sering any adversary proceeding, including licial lien avoidances; motions to disministrations. | are not member mpensation is a f the bankruptcy ining whether to be required; ny adjourned hereign planning eaffirmations avoidance of the automatics. | ers or associates of a ttached. case, including: o file a petition in bearings thereof; g; preparation are of consumer ob- liens on househotic stay and repr | my law firm. A mankruptcy; and filing of oligations; old goods; esenting the | |
| Loa | rtify that the former | | CERTIFICATION | | | | |
| | ruptcy proceeding. | ang is a complete stater | James J. Burns J. # Signature of Attorne | h | representation of th | e debtor(s) in | |

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United States Bankruptcy Court Northern District of Illinois

| In re | Sandra C. Rodriguez | | Case No. | | | |
|-------|---|---|------------------|--|--|--|
| | | Debtor(s) | Chapter 7 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | Number of Creditors:16 | | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | | |
| Date: | July 20, 2016 | /s/ Sandra C. Rodriguez Sandra C. Rodriguez Signature of Debtor | | | | |

ATG Credit. LLC PO Box 14895 Chicago, IL 60614

CMRE Finance 3075 E. Imperial High Way

CMRE Finance 3075 E. Imperial High Way

CMRE Finance 3075 E. Imperial High Way

Internal Revenue Service Kansas City, MO 64999

Matthew Sapaula c/o Jessica C. Marshall, Esq 115 S. LaSalle St. 26th FL Chicago, IL 60603

Northwest Collectors, Inc. 3601 Algonquin Rd. Suite 232 Rolling Meadows, IL 60008

NW Collector 3601 Algonquin Road Rolling Meadows, IL 60008

Sallie Mae P.O. Box 12109 Kileen, TX 76547-2109

Stanislaus Credit Control 914 14th St Modesto, CA 95354

Stanislaus Credit Control 914 14th St Modesto, CA 95354 Stanislaus Credit Control 914 14th St Modesto, CA 95354

State of Illinois - Dept. Revenue PO Box 19035 Springfield, IL 62794-9035

U.S. Dept. Education PO Box 4222 Iowa City, IA 52244-4222

U.S. Dept. Education PO Box 4222 Iowa City, IA 52244-4222

U.S. dept. Education PO Box 4222 Iowa City, IA 52244-4222